

ADJUSTABLE ARCH SUPPORT ORTHOSIS
INCLUDING VARIABLY TENSIONED ARCH CURVE
AND METHOD OF UTILIZING ORTHOSIS

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TITLE OF INVENTION

Adjustable Arch Support Orthosis
Including Variably Tensioned Arch Curve
And Method Of Utilizing Orthosis

CROSS-REFERENCE TO RELATED APPLICATIONS

5 [0001] This continuation-in-part patent application discloses and claims subject matter disclosed in copending U.S. Patent Application No. 09/578,653, filed on May 25, 2000, entitled "Orthotic Arch Support Including Self-Adjusting Arch Curve And Method Of Using Orthotic," and further discloses and claims subject matter disclosed in copending U.S. Patent Application No. 09/723,063, filed on November 27, 2000, entitled "Adjustable Arch Brace Orthotic And Method Of Treating Plantar Fasciitis And Related Foot Disorders."

STATEMENT REGARDING FEDERALLY SPONSORED RESEARCH OR DEVELOPMENT

10 [0002] Not Applicable.

BACKGROUND OF INVENTION

1. Field of Invention

15 [0003] This invention relates generally to the field of arch support orthosis for feet, and more particularly to a therapeutic arch orthosis including a variably tensioned arch curve and a method of utilizing the orthosis in treating foot disorders.

2. Description of Related Art

[0004] Prior foot support devices typically provide flexible cushioning material for

support of an arch of a foot. Typical prior devices have provided pliable cushion pads that can be utilized to build up the cushioning materials for support of a heel or an arch. Other prior devices have provided shoes or boots that contain an integral and non-removable foot support structure that is installed as a single unit into a specially designed shoe or boot having an externally accessed adjustment screw or connector, which is not transferable to other shoes. The arch portions of prior pliable insoles were not adjustable without adding or removing layers of cushioning materials.

[0005] Prior foot instep supports typically provide an arch curve that is composed of flexible materials such as leather, foam, pliable plastic, and/or resilient sheet metal to provide comfort for the wearer of the foot instep supports. Prior insole or instep devices generally are made to have a similar thickness along the length of the insole, or have a solid arch portion composed of flexible rubber or compressible foam material having a thickness extending continuously from the arch surface to a generally flat base of the insole. The prior foot instep supports were malleable and did not retain a rigid shape. The prior foot instep supports were purposefully made of malleable and flexible materials to allow changing of the curvatures to fit a user, and/or to allow the instep supports to be bent to fit into different styles of shoes. The heel and/or arch curve portions of prior instep supports were typically compressed over periods of extended use, with little or no repetitive rebound properties for retention of the original curvature of the arch portion or the instep support portion. With no retention of the original curvature of the arch portion of prior instep supports, the arch portion would fail and flatten with use, and a user's arch curve was not properly supported after extended use of prior instep supports, leading to arch pain and/or heel pain identified in layman's terms as "falling arches."

[0006] The prior arch support devices only provided arch adjustments that require replacements of stackable members of cushioning. Other foot support devices require

lateral movement of arch support portions controlled by adjusting connectors external to the shoe, and which require significant shoe modifications to permanently install within enclosing shoes or sports boots. The stackable members of cushioning deformed and flattened during extended use, and the foot support devices permanently installed within shoes were not transferable to other pairs of shoes.

[0007] Medically dispensed shoe orthotics typically provide a rigid orthotic having been generated from a cast formed of a patient's foot. The medically dispensed orthotic typically extends a partial length of the foot, from the toes to the arch portion, or from the arch portion to the heel portion, or extends the full length of the foot. The medically dispensed orthotic is not adjustable in overall length or in arch curve height, therefore when a user's foot changes due to growth, or an arch curve resumes a pre-injury height, the cast-formed orthotic is discarded and an additional cast formed orthotic is required to be generated by a medically trained professional to adequately support the foot.

[0008] Commercially available sport shoe inserts typically provide a cushioned cover over a rigid length of plastic. The rigid length of plastic may extend from the arch curve portion to a heel portion of the foot, or may extend from the toes to the heel portion of the foot. The sport shoe insert typically is available in one or two arch curve heights such as a "high arch" or "medium arch" style, with the same arch curve height provided for both of the right and left shoe inserts. The user is expected to select a foot length and arch curve height (high or medium arch), that matches his or her foot, and the user is typically not provided with assistance from a trained professional. A user having a "low arch" must utilize a "medium arch" style, or locate a lower arch support insert.

[0009] There is a need for an adjustable arch support orthosis providing therapeutic rigid support of the longitudinal arch of the feet, with the orthosis transferable between

pairs of footwear. A need exists for an adjustable arch support orthosis including a generally rigid medial longitudinal arch curve that is variably adjustable in tension along the slope of the arch curve during each weighted and unweighted cycle of walking and running. A further need exists for an adjustable arch curve orthosis including a generally rigid medial longitudinal arch curve having a means for adjusting the tension along the arch curve, to allow a user to adjust the tension and height of the arch curve for proper fit under each arch of the right and left foot, and for proper fit in various styles of footwear.

[0010] An additional need includes providing a method for utilizing an arch support orthosis being adjustable in tension along the arch curve, including varying the tension along the arch curve of the arch support orthosis for treatment of foot disorders under the supervision of a medical professional for a user suffering from heel spurs, plantar fasciitis, arch pain, tendinitis, metatarsalgia, and related foot disorders. A need exists for a method of adjusting the tension along the arch curve of an adjustable arch support orthosis, with maintenance over repetitive uses of a preferred arch curve tension and slope for support of the user's arches of the feet, with minimal training of the user and without the need for daily or weekly supervision of a medical professional.

BRIEF SUMMARY OF INVENTION

[0011] The invention comprises an arch support orthosis including an adjustable arch curve being variably tensioned and being continuous along the arch curve surface. The arch support orthosis is positionable underneath the foot and is sized and shaped to be removably placed in a shoe or other foot enclosure worn by a user. The arch support orthosis includes a plurality of contoured surface curves for support of the plurality of contours across the width and along the length of the underside of the foot. The arch support orthosis includes a metatarsal curve to support the metatarsal bones of the forefoot portion, includes a curved heel portion to support the calcaneus bone of the heel

portion, and includes an interior upwardly arched side and an outer curved lateral edge.

A continuous arch support curve (hereinafter, arch curve) of the orthosis includes a medial longitudinal arch surface along the interior upwardly arched side. The arch curve includes an anterior slope that is inclined at an anterior angle to form the leading portion of the arch curve. The arch curve includes a posterior slope that is inclined at a posterior angle to form the trailing portion of the arch curve. The arch curve further includes a medial slope that is inclined from a crown of an upper surface of the medial longitudinal arch surface towards the outer lateral edge of the orthosis. The anterior slope and the posterior slope includes a varying thickness having a depth and thickness of material that varies from the base of each slope to the upper portion of each slope along a crown of the arch curve. The base thickness of each slope is generally thicker than the thickness of the upper portion of each slope. The crown of the arch curve includes a lesser thickness than the base thickness of each slope to provide a variable thickness arch curve that is pliable and resilient along the crown for support of the mid-portion of a person's arch. The greater base thickness of each anterior and posterior slopes provides firm support of each respective anterior curve and posterior curve of a person's arch, while minimizing the degeneration of the rigidity of the arch curve over prolonged utilization in support of each respective arch. The respective base portions of each slope and the crown portion of the arch curve are respectively rigid along the base and the mid-portion of each slope, while being resilient along the crown for appropriate support of each respective portion of the user's arches during utilization of the adjustable arch support orthosis.

[0012] A means of tensioning is connectable under the continuous arch curve, and includes an adjusting means attached thereon. The tensioning means and adjusting means allows the user to adjust the anterior angle of the anterior slope, the posterior angle of the posterior slope, and to adjust the tension along the slopes and the crown of the arch curve. The variably tensioned arch curve provides a user with multiple adjustments of the

tension and height parameters of the arch curve for therapeutic treatment of various foot conditions. The arch support orthosis is easily removable without readjusting the tension and height parameters of the arch curve for placement in any pair of footwear.

5 [0013] The present invention further discloses a method of utilizing the arch support orthosis for treatment of inflammation and pain in the foot by applying an arch support orthosis having a variably tensioned continuous arch curve under the foot. The method includes selectively and periodically adjusting the tension along the arch curve, and the angle of the anterior and posterior slopes of the arch curve, by the wearer's manipulating of the tensioning and adjusting means attached under the arch curve. The method provides therapeutic support and strengthening of the wearer's arches to relieve inflammation and pain associated with plantar fasciitis and/or tendinitis of related connective tissues and joints of wearer's foot.

BRIEF DESCRIPTION OF SEVERAL VIEWS OF THE DRAWINGS

10 [0014] The above mentioned features of the invention will become more clearly understood from the following detailed description of the invention contained herein, read together with the drawings in which:

Figure 1 is a perspective top view of an arch support orthosis including a variably tensioned arch curve of the present invention;

20 Figure 2 is a side view of Figure 1, illustrating an interior side of a medial longitudinal arch curve for support of an arch of a user's left foot, illustrating a means for tensioning positioned under the medial longitudinal arch curve;

Figure 3 is an opposed side view of Figure 2, illustrating the plurality of curved surfaces of the medial longitudinal arch curve for support of a user's left foot;

25 Figure 4a is a partial side view of Figure 2, illustrating an embodiment of the means for tensioning positioned in a first tensioned configuration for support of a high

arch of a user's right foot;

Figure 4b is a partial side view of Figure 2, illustrating the means for tensioning positioned under the medial longitudinal arch curve in a second tensioned configuration for support of a medium arch of a user's right foot;

Figure 5 is a perspective top view illustrating an alternative embodiment of an arch support orthosis including a tensioned arch curve having generally rigid base supports for each anterior and posterior slopes of the medial longitudinal arch curve;

Figure 6 is a side view of Figure 5, illustrating an interior side of a medial longitudinal arch curve including an alternative embodiment of a means for tensioning for variably tensioning the arch curve of an arch support orthosis of the present invention;

Figure 7 is a partial bottom view of Figure 6, illustrating the medial longitudinal arch curve having attached underneath an alternative embodiment of a means for tensioning for variably tensioning the medial longitudinal arch curve;

Figure 8a is a partial side view of Figure 6, illustrating the posterior slope of the medial longitudinal arch curve having a means for tensioning for variably tensioning the arch curve of the present invention in support of a user's left arch and foot; and

Figure 8b is a partial side view of Figure 6, illustrating the anterior slope of the medial longitudinal arch curve having a means for tensioning for variably tensioning the arch curve of the present invention in support of the user's left arch and foot.

DETAILED DESCRIPTION OF THE INVENTION

[0015] An adjustable arch support orthosis and method of adjusting the arch curve thereof is disclosed incorporating various features of the present invention as illustrated generally for an adjustable arch support orthosis at **100** in Figure 1, at **200** in Figure 5, and at **210** in Figure 6. The arch support orthosis includes a contoured orthotic platform sized to support the foot of a user from approximately the forefoot **112** end, to about the heel end **114** of the foot **198** of a user (see Fig. 1 and 2). The forefoot **112** region

includes a transverse arch curvature **116** for support of the metatarsal bones of the forefoot (see Fig. 1 and 2). The posterior **114** region includes a concave heel section **118** for support of the calcaneus heel bone of the talus area of the foot **198** (see Figs. 1 - 3).

[0016] Each of the arch support orthosis **100, 110, 200, 210** can be sized and shaped in various lengths and widths, and each include adjustable arch curve parameters such as tensioning and arch height control to accommodate users having a narrow, rigid foot with a high arch (*pes cavus*), a medium arch, or can be sized and shaped to accommodate users having a generally more flattened foot (*pes planus*). Each respective arch support orthosis is sized for support of either the left foot or right foot of a user. Each arch support orthosis **100, 110, 200, 210** is removably positioned underneath the foot of a user in any of the owner's shoes, and is positioned upon a foot supporting surface within the shoe such as on or under the insole of any appropriately sized shoe or sandal. The arch support orthosis is shaped and proportioned to replace the insole of a foot support enclosure. The arch support orthosis is contoured for support of the arch of a right foot or a left foot, and is utilizable together as a pair of right and left arch support orthoses for simultaneous treatment of inflammation and pain in both user's feet. The arch support orthosis is quickly removable and repositioned by the user in any type of footwear such as athletic shoes, walking shoes, dress shoes, casual shoes or sandals, ski boots, and/or work boots, without disassembly of the arch support orthosis and without changing the tension of the arch curve portion of the adjustable arch support orthosis **100, 110, 200, 210**.

[0017] One embodiment of the arch support orthosis **100** includes an interior arched side **120** of an upwardly arched, continuous, medial longitudinal arch curve **130** (hereinafter, arch curve) which includes an upper, non-segmented portion referred to as an upper crown surface **132**, and a central mid-portion arch slope **122** having a sloped

portion extending toward a lengthwise center midline **124**. The arch curve **130** slopes downwards in a forward direction towards the transverse arch curvature **116**, and slopes downwards in a rearward direction towards the concave heel section **118**. The arch curve **130** also slopes laterally outwards towards an outer edge **126** (see Fig. 1). The lengthwise center midline **124** extends from about the transverse arch curvature **116** to the concave heel section **118**. On the outer side of the lengthwise central midline **124** is the outer edge **126** that is sloped slightly upwards along the outer perimeter of the arch support orthosis for support of the outer lateral portion of the foot **198**. The underside **128** of the forefoot portion **112** and heel portion **114** of the orthosis **100** is generally curved in proportion to the upper surfaces of the orthosis.

[0018] As illustrated in Figures 1 - 3, one embodiment of the arch support orthosis **100** provides a thickness of the interior arched side **120** of the arch curve **130**, and a thickness of portions of the anterior arch slope **134**, crown **132**, and the posterior arch slope **138**, that are generally similar thicknesses to provide an even distribution of tension along the arch support curve **130**. The arch curve **130** illustrated in Figures 1 - 3 includes a continuous, non-segmented arch curve **130** including an anterior arch slope **134** having an anterior slope angle **136**, and including a posterior arch slope **138** having a posterior slope angle **140** (see Fig. 2). The descending posterior slope angle **140** includes an angle of declination **142** (see Fig. 4a and 4b) in a range of between about 12 degrees angle to about 20 degrees angle. The angle of declination **142** is preferably maintained within a range of about 14 degrees angle to about 16 degrees angle for adequate support of the posterior portion of the curved arch of a user's foot **198**. For therapeutic support of the arch of a user's foot, and for treatment of many foot disorders, it is important to maintain the angle of declination within, or close to, the preferred range of angles for therapeutic support of the user's arch along the posterior arch portion proximal to where the plantar fascia is connected to the calcaneus bone of the user's foot **198**.

[0019] In order to adjust the tension along the arch curve **130, 130'** and to maintain the angle of declination **142** within a preferred range of angles, a means for tensioning **160, 170** is releasably attachable between an anterior bracket **172**, and a posterior bracket **178**, connected under each surface of the respective anterior arch slope **134** and the posterior arch slope **138**. The means for tensioning **160, 170** may include any rotatable or similarly manipulated adjustment means **164, 170** known to those skilled in the art for adjusting the length between two opposed ends connected to the anterior bracket **172** and the posterior bracket **178**. Examples of one embodiment of the means for tensioning **160** includes an anterior cable or rod **162** and a posterior cable or rod **166** that are generally rigid in a length dimension, but may be somewhat flexible in a lateral direction. A rotatable means **164** for adjusting the length between the anterior and posterior cable ends includes adjusting devices such as a sleeve nut, worm gear, or a small-sized turnbuckle (not shown). When the user manipulates the means for adjusting **164**, either by finger manipulation or by use of a small-sized tool, the anterior cable **162** and posterior cable **166** are retracted in overall length between the cable ends, thereby pulling each respective anterior bracket **172** and posterior bracket **178** toward the means for adjusting **164** with a shortening **152** of the tensioning means **160** (see Fig. 2 and 4a). As tension is placed on each respective anterior bracket **172** and posterior bracket **178** by the shortened tensioning means **160**, the bracket connectors **168, 168'** draw each respective connected portion of the anterior arch slope **134** and posterior arch slope **138** together, thereby inducing additional tension along the arch curve **130**, forming a more rigid arch curve **130**, and slightly increasing the height of the arch curve **130**, providing firm and generally rigid support of a user's arch. When the means for adjusting is manipulated in a direction to lengthen the tensioning means **160**, the length between the ends of anterior cable or rod **162** and posterior cable or rod **166** is extended due to the push of anterior end **176** against one portion of anterior bracket **172**, and extension of tab **192** against a downwards projection of bracket **172**, forcing pivoting at an anterior pivot **184**. Posterior cable or rod

166 is extended to push against posterior bracket 178 by the push of posterior end 182 against one portion of bracket 178, and extension of tab 194 against a downwardly projection of bracket 178, forcing pivoting at a posterior pivot 186. Extension of the ends of anterior cable 162 and posterior cable 166, with resulting reduction of the tension along the arch curve, and a slight decrease in the height of the arch curve to a neutral height, while retaining a neutral tension along the arch curve 130.

[0020] An alternative embodiment of the arch support orthosis 110 includes an arch support curve 130' having a tensioning means 170 and a rotatable means for adjusting 190 attached underneath as illustrated in Figures 4a and 4b. A variable thickness along the arch support curve 130' is disclosed for portions of the anterior slope 134 and posterior slope 138 of the arch curve 130'. For the underside 128' portion of the arch curve 130', an anterior base portion 144 and a posterior base portion 148 are increased in thickness in a range of about 3 mm and greater, than a comparably thin thickness 146 of the upper crown 132 portion having a range of about 1 mm to about 3 mm. A rigid arch curve 130' is provided to support heavily weighted users, and/or athletically inclined users, with the thicker base portions 144, 148 being configured to diminish flex along the anterior slope 134 and posterior slope 138 during adjustable tensioning of the arch curve 130' by a user manipulating of a means for tensioning 170. With diminished flex of the arch curve 130' by lateral and downward forces placed against the upper crown surface 132, as during repetitive forceful foot-strikes during walking, running, and other athletic activities, a failure indicative of flattening of the previous arch supports is diminished by a rigid arch curve 130' having the means for tensioning 170 connected underneath according to observations during testing with a variety of users of various weights and arch heights while wearing the adjustable arch support orthosis 100, 110 of the present invention.

[0021] During tensioning of the arch curve **130'** by manipulating and shortening **152** (see Fig. 4a) of the means for tensioning **170**, an increased tension is created along the arch curve **130'** with limited raising **150** of the height of the arch curve **130'**. When the means for tensioning **170** is lengthened in length **156** (see Fig. 4b), a decreased tension is created along the arch curve **130'** with limited lowering **154** of the height of the arch curve **130'**. A generally resilient upper crown portion **132** is formed by having a comparably thin thickness **146** of the crown portion **132**, while maximizing the rigidity of the base of the arch curve **130'** by including increased thickness of the anterior slope base portion **144** and the posterior slope base portion **148** (see Figs. 4a and 4b).

[0022] As illustrated in Figure 5, an alternative embodiment of an arch support orthosis includes a foot support platform **200** having a plurality of curved surface portions including a forefoot support end **202**, a heel support end **204**, a metatarsal arch portion **206**, a concave heel cup **208**, an upwardly arched and continuous medial side **212**, and an outer lateral side **226** contoured upwards at the outer edge of the foot support platform **200**. The arched medial side **212** is generally aligned along the interior length of the foot support platform **200** and includes an arch curve **230** arched above the foot support platform **200**. The arch curve **230** includes an anterior arch slope **232**, an anterior slope base **234** having an increased thickness compared to the upper portion of the anterior arch slope **232**, a posterior arch slope **238**, a posterior slope base **240** having an increased thickness compared to the upper portion of the posterior arch slope **238**, and a central slope **242** that extends to about the midline **222** of the orthosis. The central slope **242** may extend past the midline **222** for embodiments designed to support a high arched user. A crown portion **236** forms the crest of the arch curve **230**, and may have a thickness of about 1 mm to about 3 mm. The thickness of the upper portion of the anterior arch slope **232**, the upper portion of the central slope **242**, and the upper portion of the posterior arch slope **238**, may be in the range of about 2 mm to about 4 mm in thickness, with the

thickness of the anterior and posterior arch slope increasing toward the base portions **234**, **240**. The thickness of the lower portion of the central slope **242**, proximal to the midline **222**, may be in the range of about 2 mm to about 4 mm, and greater in thickness. The range of the thickness of the forefoot **202**, heel **204**, and outer side **226** portions of the orthosis **200**, may be in the range of about 2 mm to about 4 mm, independent of the variable thickness of respective portions of the arch curve **250**. The orthoses **100**, **110**, **200**, **210** may be composed of generally rigid materials known to those skilled in the art, including high-density polymer materials such as Delrin® by Dupont, graphite composite materials, ceramic materials, aluminum, copper, steel or another generally rigid material. When the orthoses **100**, **110**, **200**, **210** are composed of aluminum, copper, steel or another metal material, the thicknesses of each portion of the orthosis, including the arch curve portion, may be decreased by about a 1 mm increment while providing substantially rigid support of the user's arch and foot.

[0023] As illustrated in Figures 6, 7, 8a and 8b, an alternative orthosis includes a foot support platform **210** having an underside **218** of the arch curve **230**, to which a tensioning means **250** is attachable. The foot support platform **210** includes a generally aligned and continuous arched medial side **212**, an underside **220** configured to have an underside anterior slope portion **214** and a posterior slope portion **216** to which connecting brackets are connectable for attachment therebetween of the tensioning means **250**. The thickness and depth of anterior slope base **234** allows for connectors **268** to be connected into the anterior slope base **234**, which may have a thickness of about 3 mm and greater in thickness. The thickness and depth of posterior slope base **240** allow for connectors **288** to be connected into the posterior slope base **240**, which may have a thickness of about 3 mm and greater in thickness. The thickness of the anterior slope base **234** may be less than, or greater than, the thickness of the posterior slope base **240**, depending on the rigidity required for the anterior portion compared to the posterior

portion of the arch curve **230**, to support the user's arch during extended use of the orthosis **200, 210**.

[0024] As illustrated in Figures 6, 7, 8a and 8b, the foot support platform **210** includes a means for tensioning **250** having connector brackets attachable along the underside anterior slope portion **214** of the anterior slope base **234**, and along the posterior slope portion **216** of the posterior base **240**. As illustrated in Figures 6 and 7, the means for tensioning **250** includes a plurality of movement for pivoting **256, 276** in a vertical direction, and for swiveling **262, 282** in a lateral direction for the connections of the means for tensioning in relationship with the connector brackets **264, 284**. As illustrated in Figure 8b, an alternative means for tensioning **250** includes a generally rigid anterior member **252** such as a rod or cable connected to an anterior end of a means for adjusting **270** that is adjustable by a user to length or shorten the extended end of the member **252**. An anterior connector **254** is connected through a slotted connection within an anterior joint member **258** to an anterior end of the member **252**, to allow pivoting **256** in an up and down, generally vertical, direction of the anterior end of the member **252**. The anterior joint member **258** includes an anterior slot **260** into which a second end **264** of a connector bracket **266** is insertable. The anterior slot **260** of joint member **258** is attachable with bracket portion **264** to allow for lateral motion **262** (see Fig. 7) of the anterior end of **258**. Bracket portion **264** is integral with anterior bracket portion **266** which is connected with connectors **268** such as rivets or screws to the anterior slope base **234**. The bracket portion **264** and anterior bracket portion **266** may include an angle therebetween to provide the necessary alignment with anterior slot **260** and the underside anterior slope portion **214** of the anterior slope base **234**. The thick anterior slope base **234** provides rigidity for the anterior slope **232** and provides a secure mounting base for connectors **268** and anterior bracket portion **266**, providing a reliable connecting means to minimize the failure of the connectors **268** and bracket portion **266** during extensive and

repeated stress and strain of the anterior slope **232** and the tensioning means **250** imposed by heavily weighted users and/or highly active users of the foot support platform **200**.

[0025] As illustrated in Figure 8a, the alternative means for tensioning **250** includes a generally rigid posterior member **272** such as a rod or cable connected to a posterior end of a means for adjusting **270** that is adjustable by a user to length or shorten the extended end of the member **272**. A posterior connector **274** is connected through a slotted connection within a posterior joint member **278** to a posterior end of the member **272**, to allow pivoting **276** in an up and down, generally vertical, direction of the adjusting end of the member **272**. The posterior joint member **278** includes a posterior slot **280** into which a second end **284** of a connector bracket **286** is insertable. The posterior slot **280** of joint member **278** is attachable into which a first end of bracket portion **284** to allow for lateral motion **282** (see Fig. 7) of the posterior end of joint member **278**. Bracket portion **284** is integral with posterior bracket portion **286** which is connected with connectors **288** such as rivets or screws to the posterior slope base **240**. The bracket portion **284** and posterior bracket portion **286** may include an angle therebetween to provide the necessary alignment with posterior slot **280** and the underside posterior slope portion **216** of the posterior slope base **240**. The thick posterior slope base **240** provides rigidity for the posterior slope **238** and provides a secure mounting base for connectors **288** and posterior bracket portion **286**, providing a reliable connecting means to minimize the failure of the connectors **288** and bracket portion **286** during extensive and repeated stress and strain of the posterior slope **238** and the tensioning means **250** imposed by heavily weighted users and/or highly active users of the foot support platform **210**.

[0026] The means for tensioning **250** provides at least four pivotable and swiveling connector junctions along with the ability of the means for adjusting **270** to provide an extendable and retractable means for adjusting the length between connector brackets

266, 286. The means for adjusting **270** for adjusting the length between the ends of the anterior member **252** and posterior member **272** includes adjusting devices such as a sleeve nut, worm gear, or a small-sized turnbuckle (not shown). Rotation **290** of the means for adjusting **270** may be accomplished by finger manipulation tool or with a small wrench. When rotated **290** in one direction, the anterior member **252** and posterior member **272** are retracted in overall length between the member ends, thereby pulling each respective anterior bracket **266** and posterior bracket **286** toward the means for adjusting **270**. As tension is placed on each respective anterior bracket **266** and posterior bracket **286** by the retracted anterior member **252** and posterior member **272**, the brackets **266, 286** draw each respective connected portion of the anterior slope base **234** and posterior slope base **240** together, thereby inducing additional tension along the arch curve **250**, forming a more rigid arch curve **250**, and slightly increasing the height of the arch curve **250**. When the length between anterior member **252** and posterior member **272** is extended, by rotation **290** (see Fig. 6) in an appropriate direction of the means for adjusting **270**, the tension along the arch curve **230** is decreased, providing less rigid support of a user's arch at a slight decrease in the height of the arch curve **230** to a neutral height, while retaining a neutral tension along the arch curve **230**. User adjustment of the means of adjusting **270** may be incremental as the user strengthens his or her arches with use of the foot support platform **210**. In addition, the user can adjust the rigidity of the arch curve **230** for comfort during various walking or running activities, and can adjust the rigidity of the arch curve **230** of either foot support platform **210** to properly support the slight variation in arch curvature between each foot.

[0027] From the foregoing description, it will be recognized by those skilled in the art that advantages of the present invention include rigidity through the arch curve portion of the adjustable arch support orthosis **100, 110, 200, 210**, with a flexible crown portion **132, 236**, while provided a variably tensioned arch curve **130, 130', 230** to support

various configurations of users' arches and feet. It is emphasized that the neutral tension along each embodiment of the continuous and non-segmented arch curve **130, 130', 230** disclosed herein, is maintainable during constant use and repetitive stress and strain, while providing a generally rigid tensioned arch curve for support of the feet of each user that is heavily weighted, and/or has medium or high arched feet. User's having low arched feet or "flat feet" may benefit from use of the Therefore, users can manipulate the means for adjusting and the means for rotation to lengthen and shorten the tensioning means, to provide the user with a neutral and supportive tension along each respective arch curve **130, 130', 230**, and to provide the user with an increased tension along the arch curve for increased rigidity and increased support height of each respective arch curve **130, 130', 230**. During testing with a significant number of users having high and medium arches, who are also heavily weighted and provide significantly high forces on their heavily weighted arches, results are obtained that demonstrate that heavily weighted users tend to break-down the materials of prior orthotics that lack the tensioning means of the adjustable arch support orthosis disclosed herein. After repetitive use of prior orthotics by heavily weighted users, the arch curvature is reduced in height and in flex, therefore prior orthotics were reduced rapidly to non-supportive shapes by heavily weighted users. The adjustable arch support orthoses **100, 110, 200, 210** disclosed herein provides a plurality of configurations and means for tensioning for maintenance of the preferred tension and arch curve shape to consistently and repetitively support the low, medium or high arches of users, whether of average size or who are heavily weighted. With generally rigid, repetitive support of a user's arches, numerous foot disorders are avoided including plantar fasciitis and related inflammation of the connecting tissues of the feet. In addition, the adjustable arch support orthoses disclosed herein provide a method for therapeutic treatment of plantar fasciitis and related foot disorders due to the maintenance of a preferred angle of declination and a preferred tension along each arch curve **130, 130', 230**, during extended use of the adjustable arch support orthoses **100**,

110, 200, 210.

[0028] An alternative embodiment of the means for tensioning includes a plurality of swivel joints positioned along the respective anterior and posterior cables or bars (not shown) to allow rotation of portions of the means for tensioning during rotating of the means for adjusting. An additional embodiment of the means for tensioning includes two straps of non-extendable web material with each of the two straps having a distal end attached to the respective anterior bracket and posterior bracket connected underneath respective anterior slope and posterior slope of the arch curve (not shown). Each of the two straps have a proximal end connectable together by a means for adjusting such as a sliding buckle or a pressure clamp that is positioned under the medial longitudinal arch curve. A further additional embodiment of the means for tensioning includes a foam enclosure for either or both ends of the means for tensioning for shock absorption to reduce failure of the anterior and posterior connectors and brackets attached under the anterior and posterior portions of the adjustable arch curve. An alternative embodiment of the means for adjusting includes an anterior means for adjusting connected proximal to the anterior bracket, and a posterior means for adjusting connected proximal to the posterior bracket, with at least one cable or rod connected therebetween.

[0029] While the present invention is illustrated by description of several embodiments and while the illustrative embodiments are described in considerable detail, it is not the intention of the applicants to restrict or in any way limit the scope of the appended claims to such detail. Additional advantages and modifications within the scope of the appended claims will readily appear to those skilled in the art. The invention in its broader aspects is therefore not limited to the specific details, representative apparatus and methods, and illustrative examples shown and described. Accordingly, departures may be made from such details without departing from the spirit or scope of

applicants' general inventive concept.